

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **G89545** (9)  
1. Corporation Name

**TRIPLE CROWN ELECTRONICS CORPORATION**



Principal Place of Business

**257 GOOLESBY BLVD  
DEERFIELD BCH. FL 33442**

Mailing Address

**4560 EASTGATE PARKWAY  
MISSISSAUGA ON L4W-3-6  
US**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

**L4W3W6 CANADA**

3. Date Incorporated or Qualified

**03/09/1984**

3a. Date of Last Report

**05/01/1995**

4. FEI Number

**59-2408280**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**WHEELER, CHRISTOPHER C.  
2255 GLADES RD #340-W  
SUITE 351  
BOCA RATON FL 33431**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

**FL**

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and then it applies

Signature, typed or printed name of registered agent and then it applies

(DATE)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DP  
EVANS, CHARLES J.**  
STREET ADDRESS **4560 EASTGATE PARKWAY**  
CITY-STATE-ZIP **MISSISSAUGA, ONT, CAN**

TITLE ☐ DELETE

NAME **DV  
AYIOTIS, PHAEDON**  
STREET ADDRESS **4560 EASTGATE PARKWAY**  
CITY-STATE-ZIP **MISSISSAUGA, ONT, CAN**

TITLE ☐ DELETE

NAME **ST  
WALKER, SG. DWIGHT**  
STREET ADDRESS **4560 EASTGATE PARKWAY**  
CITY-STATE-ZIP **MISSISSAUGA ON**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

**WALKER, G. DWIGHT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**G. DWIGHT WALKER**

**Jan 31, 96**

**905  
629-1111**

Daytime Phone #

CR2E034 (12/95)